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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 21918 7590 12/06/2004 DOWNS RACHLIN MARTIN PLLC 199 MAIN STREET P O BOX 190 BURLINGTON, VT 05402-0190			papers have in	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.			
		Mr. Table	′ ⊢			(Signature)	
		RADER	<u> </u>		 		
			L			(Date)	
APPLICATION NO.	FILING DATE	FIRST N	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/605,523	10/06/2003		John A. Fifield		BUR920030112US1	2522	
TITLE OF INVENTION: ELECTRONICALLY PROGRAMMABLE ANTIFUSE AND CIRCUITS MADE THEREWITH 00000243 090456 10605523							
			j 01	FC:1501 FC:1504	1400.00 BA 300.00 DA	10605523	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		TION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1 370 1,4 <i>0</i> 0	\$3	300	\$1 670 03/07/2005		
EXAMINER		ART UNIT	UNIT CLASS-SUBCLASS				
ERDEM	2826	26 257-530000					
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE-MAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
International Business Machines Corporation New Orchard Road, Armonk, NY 10504 Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):							
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Authorized Signature	Janumett. 7	ruin	<u> </u>	Date/_	3 January 20	205	
Types of particular to the state of the stat							
This collection of information	on is required by 37 CFR 1.3	1. The information is requ	ired to obtain or reta	in a benefit by	the public which is to file (an	d by the USPTO to process)	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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